CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

Health Care Department Operations Manual

5.6.2 Prison Health Care Provider Network Web Portal Access and Provider Directory Usage

(a) Policy

- (1) California Correctional Health Care Services (CCHCS) contracts with a Prison Health Care Provider Network (PHCPN) contractor to provide a network of specialty physicians, hospitals, ambulances, and other health care service providers. Upon approval by CCHCS Direct Care Contracts Section (DCCS) Headquarters Management (HQM), the PHCPN contractor shall make network-related information available to designated personnel, as determined by each institution, with a need to access information via a web portal.
- (2) The web portal includes a Provider Directory and Information Warehouse. The Provider Directory houses the Provider Network and shall be utilized to canvass for current and active participating health care service providers within the PHCPN to meet patient health care service needs. The Information Warehouse contains information on health care utilization and the provider network's performance for oversight and reporting. Designated personnel on the PHCPN Web Portal shall be granted access to the Provider Directory and/or the Information Warehouse, once the request has been approved by DCCS HQM.

(b) Procedure

(1) Web Portal Access

- (A) Users requesting access to the PHCPN Web Portal shall submit a DCCS Training Request Form to register for the Health Net Provider Directory training provided by Specialty Network Administration Program (SNAP). The DCCS Training Request Form is available on CCHCS Lifeline under "Direct Care Contracts," "Quick Links" tab or at the following link:
 - http://lifeline/PolicyandAdministration/BusinessServices/MedicalContracts/Training/DCCSTrainingRequestForm.pdf.
- (B) At the time of training, instructions shall be provided on how to complete the Health Net Federal Services CCHCS Access Request Form Authorized User Form (herein referred to as Health Net Access Request Form). The user shall complete the Health Net Access Request Form, available on CCHCS Lifeline under "Direct Care Contracts," "Resources," "Forms" tab, "Health Care Provider Network" or at the following link: http://lifeline/PolicyandAdministration/ResourceManagement/HealthCareInvoicing/Documents/Healthnetcom "20AccessRegForm.pdf.
- (C) The Chief Executive Officer (CEO), Chief Medical Executive, Chief Nurse Executive, Chief Support Executive, or designee, shall electronically sign the form to approve the request. Their signature approves that the user's initial profile can be created, modified, or deleted upon separation of duties. The user shall submit the approved form to the following SNAP inbox: snap@cdcr.ca.gov.
- (D) SNAP shall route the Health Net Access Request Form to DCCS HQM, or designee, who shall then review and approve, if necessary, sign each Health Net Access Request Form. DCCS HQM shall return the signed Health Net Access Request Form to SNAP for processing.
- (E) SNAP shall email the requestor indicating approval or denial of the request. If approved, the email notifies the user that their profile has been created and how to login to the Provider Network Web Portal Maintenance.

(2) Provider Directory Usage

PHCPN Web Portal users who utilize the Provider Directory shall:

- (A) Canvass the PHCPN Provider Directory Tier 1 and Tier 2 service providers using the ProviderSearch tool. The ProviderSearch tool utilizes four available criteria: location type (address/radius, city, county, or state); provider name: provider identification number: or license number. The search shall be narrowed by plan/network type; and specialty and subspecialty.
 - 1. Tier 1 and Tier 2 provider information are available based on access granted. Tier 1 providers are the preferred choice and shall be utilized first, if available, unless there is a health care need to send the patient to a Tier 2 provider.
 - 2. Written approval (e-mail is acceptable) shall be obtained from the institution CEO, or designee if a Tier 2 service provider is selected. Approvals shall be sent to the SNAP inbox: snap@cdcr.ca.gov.
- (B) Contact SNAP for further direction if no available resources are found, or if the available resources are unable to fulfill a health care service need through the PHCPN Provider Directory.

CALIFORNIA DEPARTMENT OF CORRECTIONS AND REHABILITATION CALIFORNIA CORRECTIONAL HEALTH CARE SERVICES

Health Care Department Operations Manual

References

- California Correctional Health Care Services, Direct Care Contracts, Directives and Procedures, Chapters 5.1,
 Prison Health Care Provider Network (PHCPN) Web Portal Access
 http://lifeline/PolicyandAdministration/BusinessServices/MedicalContracts/Directives%20and%20Procedures/DP5-1.pdf
- California Correctional Health Care Services, Direct Care Contracts, Directives and Procedures, Chapters 5.3, Prison Health Care Provider Network (PHCPN) Provider Directory Usage http://lifeline/PolicyandAdministration/BusinessServices/MedicalContracts/Directives%20and%20Procedures/DP5-3.pdf

Revision History Effective: 05/2018 Revision: 03/2022